

**Nevada Division of Health Care Financing and Policy**  
**Health Care Reform Projected Costs--Senate Bill**  
**Assumptions**

Projection Date 3/30/2010  
Health Care Reform Start Date 1/1/2014

**New Eligibles**

	2014	2015	2016	2017	2018	2019
FMAP	100.00%	100.00%	100.00%	97.50%	94.50%	93.50%
Uptake Rate	37.50%	75.00%	100.00%	100.00%	100.00%	100.00%
Employer Insurance Drop Rate	5.00%	10.00%	15.00%	15.00%	15.00%	10.00%

FMAP for SFY 2014 is 100% because Projection starts on 1/1/2014

FMAP is blended for 2014, 2017, 2018, and 2019 because the enhancements begin on January 1.

Population New Eligibles

	2014	2015	2016	2017	2018	2019
Uninsured adults, 25 - 133% FPL	108,600	107,348	105,995	104,689	103,814	103,526
Uninsured 6 - 18, 100 - 133% FPL	15,727	14,901	14,044	13,216	12,565	12,143
Total Population Adults, 25 - 133% FPL	219,790	217,257	214,518	211,876	210,105	209,522
Total Population 6 - 18, 100 - 133% FPL	29,578	29,687	29,788	29,897	20,048	30,255

**Woodwork Effect (Currently eligible but not enrolled in Medicaid)**

	2014	2015	2016	2017	2018	2019
FMAP	50.00%	50.00%	50.00%	50.00%	50.00%	50.00%
Uptake Rate	5.00%	10.00%	15.00%	25.00%	35.00%	50.00%
Employer Insurance Drop Rate	5.00%	10.00%	15.00%	15.00%	15.00%	10.00%

Uptake rate is assumed to be 50% because of provider ability to do presumptive eligibility and because no penalty for under 100% FPL for failure to insure.

Enrollment assumed to reach 40% of total by 2017 and 100% of total by 2019.

Population - Woodwork Effect

	2014	2015	2016	2017	2018	2019
Uninsured 0 - 5, below 133%	34,291	33,159	31,962	30,790	29,876	29,318
Uninsured 6 - 18, below 100%	55,165	51,611	47,870	44,191	41,221	39,221
Uninsured Preg 15 - 18, 100% - 133%	71	71	72	73	74	75
Uninsured Preg 19 - 44, below 133%	4,845	4,656	4,456	4,260	4,105	4,007
Total Population 0 - 5, below 133% FPL	112,996	109,268	105,323	101,459	98,449	96,609
Total Population 6 - 18, below 100%	157,735	147,572	136,874	126,357	117,862	112,114
Total Population Preg 15 - 18, 100% - 133%	247	250	253	256	259	262
Total Population Preg 19 - 44, below 133%	8,970	8,619	8,248	7,558	7,599	7,418
Current Medicaid caseload w/ growth	274,442	269,794	265,029	261,332	259,350	258,741

**Costs**

	2014	2015	2016	2017	2018	2019
Current Medicaid Population PMPM	\$474	\$486	\$498	\$510	\$523	\$536
New Eligibles PMPM	\$205	\$210	\$215	\$221	\$226	\$232
Maternity Kick One-Time Payment	\$5,544	\$5,599	\$5,655	\$5,712	\$5,769	\$5,827
% of Year	50.00%	100.00%	100.00%	100.00%	100.00%	100.00%
Category 28 Total Current Caseload	\$65,065,320	\$63,963,362	\$62,833,665	\$61,957,172	\$61,487,275	\$61,342,892
Category 28 SGF Current Caseload	\$55,837,077	\$54,891,410	\$53,921,939	\$53,169,759	\$52,766,508	\$52,642,603

PMPM assumes cost per new eligible will be less than current HMO costs as most will be HMO and will be a healthier population.

PMPM increases at 2.5% per year; maternity kick increases at 1% per year.

Category 28 costs do not include DSH.

**Administrative Assumptions**

DWSS Admin Cost Per 1,000 enrollees	\$200,000						
NOMADS Replacement IT Costs	\$150,000,000	YRS Implement	5	% Benefitting Medicaid	50.00%	FMAP	50.00%
Medicaid Admin Percent w DWSS	5.41%	w/o DWSS	4.60%		Avg DHCFF FMAP*		62.50%
MMIS IT Development Costs	-					FMAP	90.00%

\*Average DHCFF FMAP is blends 50% FMAP for general administration with 75% FMAP for MMIS and Utilization Review.